TENNESSEE GENERAL ASSEMBLY FISCAL REVIEW COMMITTEE



FISCAL NOTE

SB 1114 - HB 908

March 17, 2013

SUMMARY OF BILL: Requires each health care provider to compile a pricing information list; post on the provider's Internet web site the pricing information list and its effective date before providing a health care service or bundled health care services and supplies to a patient; and provide notice of a price change by posting notice on the provider's Internet web site not less than 30 days prior to such price change. No health care provider can charge an amount that is different than the amount listed in the pricing information list or include a discount, bonus, fee, or other charge that changes the health care price listed in the pricing information list except in the instance that the price would present a hardship to the patient. Except in the case of emergency treatment, a patient that receives a health care service or bundled health care services and supplies from a provider and pays less than the listed price is personally responsible for the amount that is more than the payment provided under the patient's health plan. The bill does not apply to the price of a health care service or supply or bundled health care services and supplies provided to a patient for whom a health care provider has accepted assignment for the health care service or supply from TennCare or Medicare or any other federal, state, or local government-sponsored medical assistance program or a financially or medically indigent person who qualifies for indigent care services based on a sliding fee scale or a health care provider's written charity care policy. A health care provider who violates the requirements or prohibitions of the bill is subject to disciplinary action by the board of the profession of the healing arts issuing a license for the health care provider.

Licensed physicians, osteopathic physicians, and health care facilities are required to develop and enforce written policies for billing health care services and supplies that address any discounting of health care services and supplies to indigent patients; whether interest will be applied to any billed health care service or supply not covered by a third-party and the amount of such interest; and the procedure for handling complaints relative to billed charges for health care services or supplies.

ESTIMATED FISCAL IMPACT:

NOT SIGNIFICANT

Assumptions:

• According to the Department of Health, any increased expenditures resulting from investigations and disciplinary actions will be not significant and can be accommodated within the existing resources of the Department and applicable licensing boards without an increased appropriation or reduced reversion.

- Pursuant to Tenn. Code Ann. § 4-3-1011, all regulatory boards are required to be self-supporting over a two-year period.
- The Board of Medical Examiners had closing balances of \$613,808 in FY10-11, \$687,808 in FY11-12, and a closing reserve balance of \$2,153,016 on June 30, 2012.
- The Board of Osteopathic Examination had closing balances of \$132,030 in FY10-11, \$117,644 in FY11-12, and a closing reserve balance of \$345,204 on June 30, 2012.
- The Board of Licensing Health Care Facilities had closing balances of \$594,769 in FY10-11, and \$450,785 in FY11-12. Any revenues in excess of expenditures revert to the general fund at fiscal year end.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.

Lucian D. Geise, Executive Director

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